
Law Offices of

RECEIVED CENTRAL FAX CENTER

FEB 0 6 2006

SENNIGER POWERS

One Metropolitan Square, 16th Floor St. Louis, Missouri 63102

Telephone (314) 231-5400 Facsimile (314) 231-4342

FACSIMILE TRANSMITTAL COVER SHEET

DATE: 2/6/06 FILE NUMBER: BTEC 9682.1			
PTO FACSIMILE NUMBER: 571-273-8300			
PLEASE DELIVER THIS FACSIMILE TO: Mail Stop RCE THIS FACSIMILE IS BEING SENT BY: Richard L. Bridge NUMBER OF PAGES: INCLUDING COVER SHEET			
TIME SENT: 4:10 pm OPERATOR'S NAME Michelle			
CERTIFICATION OF FACSIMILE TRANSMISSION			
I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.			
Michelle Grindstaff			
Typed or printed name of person signing certification			
Signature Date			
Signature ()\ Date			
Type of paper transmitted: Amendment A; Request for Continued Examination			
Applicant's Name: Joel J. Kampa et al.			
Serial No.: 10/814,363 Examiner: K. Jastrzab			
Filing Date: 3/31/2004 Art Unit: 1744 Confirmation No.: 7746			
Application Title: APPARATUS AND KIT FOR GENERATION OF CHLORINE DIOXIDE GAS			

IF YOU DO NOT RECEIVE ALL PAGES CLEARLY, CALL BACK AS SOON AS POSSIBLE. CONFIRMING NUMBER IS (314) 231-5400.

FEE TRANSMITTAL

Application Number 10/814,363
Filing Date March 31, 2004
Inventor(s) Joel J. Kampa et al.
Examiner Name Krisanne M. Jastrzab
Attorney Docket Number BTEC 9682.1

Art Unit 1744 Confirmation No. 7746

RECEIVED CENTRAL FAX CENTER

FEB 0 6 2006

■ Applicant claims small entity status.

METHOD OF PAYMENT

METHOD OF PAYMENT			
X	The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.		
	Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.		
		FEE CALCULATION	
1.		BASIC FILING, SEARCH AND EXAMINATION FEES (Type:) Subtotal (1) \$	
2.		EXCESS CLAIM FEES	
	Multi	Claims (HP) = 0 x Fee = \$0.00 Cl	
3.		APPLICATION SIZE FEE	
		Pages $N/A = 100 = NaN \div 50 = 0 \times 5 = 50.00$ (round up to whole #)	
		Subtotal (3) \$0.00	
4.	X	OTHER FEE(S)	
		Three month extension of time Information disclosure statement 37 CFR 1.17(q) processing fee Non-English specification Notice of Appeal Filing a brief in support of appeal Request for oral hearing Other: Request for Continued Examination	
		Subtotal (4) \$905.00	
TOTAL AMOUNT OF PAYMENT \$905.00			
$\mathcal{O}_{\mathcal{O}}}}}}}}}}$			
Richa	ard L	2/6/2006 Date	
		0,529 Telephone: 314-231-5400	

RLB/tmg

Via Facsimile 571-273-8300